

# Authorization Agreement for Direct Deposit of SOCAN Royalty Payments

## Personal Details

Full Name of Writer or Publisher

SOCAN Identification Number

Mailing Address (A physical address is required for banking purposes. P.O. Box addresses are invalid)

E-mail Address

Telephone Number

**Direct Deposit is available for Canadian and U.S. bank accounts only.**

## Bank Details

Bank Name

Bank Address

Account Type (Select One):

Chequing/Checking

Savings

Bank Telephone Number

**For Canadian Bank Accounts:** If you do not have a chequing account, please contact your bank to confirm your transit number, bank code and account number.

**For U.S. Bank Accounts:** If you do not have a checking account, please contact your bank to confirm your routing number and account number.

Transit Number

Bank Code

Account Number\*

Routing Number

Account Number






5 digits

3 digits

7 or more digits

9 digits

7 or more digits

John Smith  
123 Main Street  
Anytown, Province Canada

Date \_\_\_\_\_ 20\_\_\_\_ 243

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_  
/100 DOLLARS

Canadian Bank Name \_\_\_\_\_  
Branch \_\_\_\_\_  
Bank Address \_\_\_\_\_

MEMO \_\_\_\_\_

⑈ 243 ⑈ ⑆ 00005 ⑆ 23 ⑆ 12345678 ⑆

Cheque Number    Transit Number    Bank Code    Account Number

John Smith  
123 Main Street  
Anytown, State USA

Date \_\_\_\_\_ 20\_\_\_\_ 0243

PAY TO THE ORDER OF \_\_\_\_\_ \$ \_\_\_\_\_  
/100 DOLLARS

US Bank Name \_\_\_\_\_  
Branch \_\_\_\_\_  
Bank Address \_\_\_\_\_

MEMO \_\_\_\_\_

⑆ 23456700 ⑆ ⑆ 23456000 ⑆ 0243

Routing Number    Account Number    Check Number

\* Credit unions: please add the verification number after your account number.

I, personally, or on behalf of the above-mentioned legal entity that I have authority to bind, authorize the Society of Composers, Authors and Music Publishers of Canada (SOCAN) to electronically deposit the royalty payments to the specified account. I verify that the information I have provided is accurate and complies with the SOCAN Distribution Rules, including the requirement that the account be in the name of the member entitled to the performing rights royalties. It is my responsibility to immediately advise SOCAN of any changes to my account details.

Date

Your Name (printed)

Signature

SIN/Security Number/Business Number

Direct Deposit of your royalty payments will only be initiated when SOCAN is in receipt of this completed and signed Authorization Agreement. Please ensure that the above information is complete and accurate.

Your royalty statements will be available to you online. A user ID is required to access your royalty statements online. To obtain an ID, visit [www.socan.com](http://www.socan.com) and click on "My Account," then "Sign Up."

Please mail/fax/email this completed form to:

**SOCAN**

SOCAN  
41 Valleybrook Drive  
Toronto, ON M3B 2S6

Telephone: 1.866.307.6226  
Facsimile: 416.445.7108  
[members@socan.com](mailto:members@socan.com)